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	APPLICATION NO. FILING DATE	FIRST NAM	ED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/795,899 03/08/2004	William	Whittaker		1615-1	1522
TITLE OF INVENTION: SHINGLE RIPPER						
	APPLN. TYPE SMALL ENTITY	ISSUE FEE	PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional YES	\$700		. \$300 \$1000 05/16/2005		05/16/2005
	EXAMINER ART UNIT  GRANT, ALVIN J 3723			081-045000		
٠	Change of correspondence address or indication of "FCFR 1.363).      Change of correspondence address (or Change of Address form PTO/SB/122) attached.      "Fee Address" indication (or	Correspondence (1) the register (2) the negister 2 register 2 register	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identercordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment 05/10/2005  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY 02 FC: 1504						locument has been filed for 014 10795899 700.00 DP 300.00 DP
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2	5. Change in Entity Status (from status indicated above)  2. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  3. Applicant claims SMALL ENTITY status. See 37 CFR 1.27(g)(2).					
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	Authorized Signature The Ula	ung	<u></u>	Date	1AY 6,20	205
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